UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

PNOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

141 4039

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response......16.00

SEC USE ONLY						
Prefix		Serial				
DAT	RECEI	VED				

Name of Offering ( check if this is an amendment and name has changed, and Limited Partnership Interests in Bain Capital X Coinvestment Fund, L.P.	d indicate change.)
Filing Under (Check box(es) that apply):   Rule 504 Rule 505 Rule 5	06 ☐ Section 4(6) ☐ ULOE
Type of Filing: New Filing 🔲 Amendment	
	NTIFICATION DATA
Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and in Bain Capital X Coinvestment Fund, L.P.	ndicate change.)
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (inc
111 Huntington Avenue	(617) 516-2000
Boston, MA 02199	
Address of Principal Business Operations (Number and Street, City, State, Zip C (if different from Executive Offices)	Code) Telephone Number (including Area Code)
Brief Description of Business	
Private Investment Fund	
Type of Business Organization	
corporation	
_ ' ' ' '	Other (please specify): Cayman Islands exempted limited partnership
☐ business trust ☐ limited partnership, to be formed	
Actual or Estimated Date of Incorporation or Organization:    Month   0   7   0	Year D 7
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Serv	vice abbreviation for State:
CN for Canada; FN for	other foreign jurisdiction) F N NOV 2 1 2007
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## GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. 61-75 U.S.C 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (5/91

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - X Each promoter of the issuer, if the issuer has been organized within the past five years;
  - X Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - X Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - X Each general and managing partner of partnership issuers.

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General Partner	
Full Name (Last name first, if individual)	
Bain Capital Partners X, L.P.	
Business or Residence Address (Number and Street, City, State, Zip Code)  111 Huntington Avenue, Boston, MA 02199	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General Partner of the GP	
Full Name (Last name first, if individual)	
Bain Capital Investors, LLC	
Business or Residence Address (Number and Street, City, State, Zip Code)	
111 Huntington Avenue, Boston, MA 02199	
Check Box(es) that Apply:  Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	r
Full Name (Last name first, if individual)	
Bain Capital, LLC	
Business or Residence Address (Number and Street, City, State, Zip Code)	
111 Huntington Avenue, Boston, MA 02199	
Check Box(es) that Apply: ☑ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner	ŗ
Full Name (Last name first, if individual)	
Bain Capital Partners, LLC	
Business or Residence Address (Number and Street, City, State, Zip Code)  111 Huntington Avenue, Boston, MA 02199	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
Barnes, Steven W. Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Bain Capital Investors, LLC, 111 Huntington Avenue, Boston, MA 02199	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner	 r
Full Name (Last name first, if individual)	
Bekenstein, Joshua	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Bain Capital Investors, LLC, 111 Huntington Avenue, Boston, MA 02199	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner	r _
Full Name (Last name first, if individual)	
Biffar, Ulrich F.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Bain Capital Investors, LLC, 111 Huntington Avenue, Boston, MA 02199	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	r
Full Name (Last name first, if individual)	
Conard, Edward W.	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Bain Capital Investors, LLC, 111 Huntington Avenue, Boston, MA 02199	
	J
Full Name (Last name first, if individual)  Connaughton, John P.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Bain Capital Investors, LLC, 111 Huntington Avenue, Boston, MA 02199	
wo bain Capital investors, tile, iii ituliington Avenue, boston, mA 02199	

Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	<u> </u>				8 8
Corrigan, Jay P.	n marriadar,				
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)		
c/o Bain Capital Investors,	LLC, 111 Hur	ntington Avenue, Boston	n, MA 02199		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Doherty, Sean M.	<u> </u>		<u></u>		
Business or Residence Addr					
c/o Bain Capital Investors,		Beneficial Owner			
Check Box(es) that Apply: Full Name (Last name first,	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Edgerley, Paul B.	ii individuai)				
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)		
c/o Bain Capital Investors,					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Goss, Michael F.					
Business or Residence Addr					
c/o Bain Capital Investors,					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Grimaldi, Ferdinando Q.	- At 1	10 0 0 7	<u> </u>		
Business or Residence Addrec/o Bain Capital Investors,					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
		Belieficial Owlief	M Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, Gross-Loh, David	if individual)				
Business or Residence Addr	ess (Number an	d Street City State Zin	Code		
c/o Bain Capital Investors,					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first,					
Hildebrandt, James H.	ii marridaar,				
Business or Residence Addre	ess (Number an	d Street, City, State, Zip	Code)		
c/o Bain Capital Investors,	LLC, 111 Hur	itington Avenue, Bostor	n, MA 02199		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Hitch, S. Jordan					
Business or Residence Addre					
c/o Bain Capital Investors,		·			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Huang, Jingsheng					
Business or Residence Address					
c/o Bain Capital Investors,			<del>'</del>		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				
Levin, Matthew S.	one (Newslaw)	d Comman City Co. 17	C-4.)		
Business or Residence Addre c/o Bain Capital Investors,					
wo Dain Cupital Illittatula,	i i i i i i i i i i i i i i i i i	ungion Avenue, Dostol	1, 111/1 04177		

			<u>-</u> .		
Check Box(cs) that Apply:	□Promoter	Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Loring, Ian K.					
Business or Residence Addr					
c/o Bain Capital Investors,	LLC, 111 Hu	ntington Avenue, Bostor	n, MA 02199		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)			•	
Loughlin, Philip H.	ii iiidividdai)				
Business or Residence Addr	occ (Number or	d Street City State 7in	Code)		
c/o Bain Capital Investors,					
· · · · · · · · · · · · · · · · · · ·	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Check Box(es) that Apply:		Beneficial Owner	M Executive Officer	Director	General and/or Wallaging Farther
Full Name (Last name first,	if individual)				
Nunnelly, Mark E.					
Business or Residence Addre					
c/o Bain Capital Investors,	LLC, 111 Hui				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Pagliuca, Stephen G.	,				
Business or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)		
c/o Bain Capital Investors,	•				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	ir maividuai)				
Plantevin, Michael G.	(NI	10 0: 0 7:	C1-)	<del></del>	
Business or Residence Addr					
c/o Bain Capital Investors,					
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Poler, Dwight M. Business or Residence Addr	- (NL 1	1 Charles Charles The	C-1-)		
c/o Bain Capital Investors,					
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Sarkis, S. Walid	(NL )	164	C-1)		
Business or Residence Addr					
c/o Bain Capital Investors,					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Shiroshita, Junichi			0.11		
Business or Residence Addr					
c/o Bain Capital Investors,	•				
Check Box(es) that Apply:	□Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Siefke, Michael					
Business or Residence Addr					
c/o Bain Capital Investors,					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Sugimoto, Yuji					
Business or Residence Addr					
c/o Bain Capital Investors,		*			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)		<del></del>		
Thorndike, Benjamin					
Business or Residence Addr					
c/o Bain Capital Investors,	LLC, 111 Hu	ntington Avenue, Bostor	n, MA 02199		

					-
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Ward, Michael D.				. <u></u>	
Business or Residence Addr	ess (Number an	id Street, City, State, Zip	Code)		
c/o Bain Capital Investors,	LLC, [11 Hu	ntington Avenue, Bosto	n, MA 02199		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)	<del></del>			
Zhu, Jonathan					
Business or Residence Addr					
c/o Bain Capital Investors,	LLC, 111 Hu	ntington Avenue, Bosto	n, MA 02199		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Zide, Stephen M.					
Business or Residence Addr	ess (Number ar	nd Street, City, State, Zip	Code)		
c/o Bain Capital Investors.	LLC, 111 Hu	ntington Avenue, Bosto	n, MA 02199		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Albright, Richard C.				<del></del>	
Business or Residence Addi	ress (Number ai	nd Street, City, State, Zip	Code)		
c/o Bain Capital Investors	<u>, LLC, 111 Hu</u>	<u>ntington Avenue, Bosto</u>	n, MA 02199		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Balson, Andrew B.					
Business or Residence Add	ress (Number a	nd Street, City, State, Zip	Code)		
c/o Bain Capital Investors	<u>, LLC, 111 Hu</u>	ntington Avenue, Bosto	n, MA 02199		

						B. INFO	RMATIO	N ABOU	T OFFER	ING		,			
1.	Has the	e issuer sol	d, or does t	he issuer in	tend to sell,	to non-acc	redited inve	estors in thi	s offering?			***************************************		Yes	No ⊠
					A	Answer also	in Append	ix, Column	2, if filing	under ULO	E.				
2. What is the minimum investment that will be accepted from any individual? *subject to discretion of the General Partner								•••••	\$ 25,00	0,000*					
3.	Does th	ne offering	permit join	t ownership	of a single	unit?	*************	*****************	************	***************************************			•••••	Yes	No
4.	remune person	eration for a or agent of	solicitation f a broker o	of purchase r dealer reg	ers in conne istered with	ction with s the SEC a	sales of second/or with a	urities in th a state or sta	e offering. ites, list the	If a person name of th	to be listed e broker or	ission or sit is an assoc dealer. If r broker or d	iated nore than		
Full N N/A		ast name fi	rst, if indivi	idual)				<u></u>	<del></del>						
		esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	ode)								
Name	of Asso	ciated Bro	ker or Deal	er											
States	s in Whic	ch Person L	isted Has S	Solicited or	Intends to S	Solicit Purc	hasers								
	(Check '	'All States'	or check i	ndividual S	tates)			***********				All States			
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ} [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full N			rst, if indivi			<u> </u>									
Busir	ness or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)			<del></del>					
Name	e of Asso	ciated Bro	ker or Deal	er											_
States	s in Whic	ch Person I	isted Has S	Solicited or	Intends to S	Solicit Purc	hasers							·	
(Chee	ck "All S	tates" or cl	neck individ	lual States)				***************************************				All States			
	[AL] [IL] [MT] [RI] Name (La	[AK] [IN] [NE] [SC] ast name fi	[AZ] [lA] [NV] [SD] rst, if indiv	[AR] [KS] [NH] [TN] idual)	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] {PA] [PR]		
Busir	ness or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)				<del></del>				
Name	e of Asso	ciated Bro	ker or Deal	er											
States	s in Whic	ch Person I	_isted Has S	Solicited or	Intends to S	Solicit Purc	hasers								
(Chec	ck "All S	tates" or cl	neck individ	fual States)			.,,					All States			
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	s
	☐ Common ☐ Preferred		· <u> </u>
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$ 1,656,735,135	\$ 1,656,735,135
	Other (Specify)	\$	\$
	Total	\$ 1,656,735,135	\$ 1,656,735,135
	Answer also in Appendix, Column 3, if filing under ULOE.		····
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	116	\$ 1,656,735,135
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		S
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering .	Type of Security	Dollar Amount Sold
	Rule 505		S
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs		\$
	Legat Fees	$\boxtimes$	\$ 1,000,000
	Accounting Fees		S
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		s
	Other Expenses (identify)		\$
	Total	$\boxtimes$	\$ 1,000,000

	C. OFFERING	<u>PRICE, NUMBER OF INVESTORS, EXPENSES AND US</u>	SE OF TROCEEDS	
4.		offering price given in response to Part C - Question I and to estion 4.a. This difference is the "adjusted gross proceeds to t		\$ 1,655,735,135
5.	the purposes shown. If the amount for any pu	ss proceeds to the issuer used or proposed to be used for each roose is not known, furnish an estimate and check the box to be listed must equal the adjusted gross proceeds to the issuer set ove.	the	
			Payments to Officers, Directors, & Affiliates	
	Salaries and fees		<u>s</u>	<u></u> \$
	Purchase of real estate		S	□ \$
	Purchase, rental or leasing and installation of	machinery and equipment	S	<b>S</b>
	Construction or leasing of plant buildings and	S	□ <b>\$</b>	
	Acquisition of other businesses (including the offering that may be used in exchange for the pursuant to a merger)	□ <b>s</b>	□ \$	
	•			□ \$
	• •			□s
	Other (specify): Investments in securities ar	s	☑ \$ 1,655,735,135	
	Column Totals		s	☑ \$ 1,655,735,135
	Total Payments Listed (column totals added).		<u>\</u>	3 1,655,735,135
	· · · ·	D. FEDERAL SIGNATURE	<del> </del>	
n u	issuer has duly caused this notice to be signed bundertaking by the issuer to furnish to the U.S. S-accredited investor pursuant to paragraph (b)(2	by the undersigned duly authorized person. If this notice is fil ecurities and Exchange Commission, upon written request of	ed under Rule 505, the foits staff, the information	ollowing signature constitutes furnished by the issuer to any
ls	suer (Print or Type) ain Capital X Coinvestment Fund, L.P.	Signature Will	Date November 19 ,2	007
	ame of Signer (Print or Type) lichael F. Goss	Title of Signer (Print or Type)  Managing Director of the General Partner of the G	eneral Partner of the Is	suer

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

ATTENTION

